BEST AVAILABLE COPY

DO/EO BIBLIOGRAPHIC DATA ENTRY

RECEIPT DATE: 07 / 31 / SERIAL NUMBER: 09 / 601255 00 30 / 99 IA NUMBER: PCT/ JP99 / 06712 IA FILING DATE: 11 / DELAY WAIVED (Y/N): Y FAMILY NAME: HASHIMOTO DEMAND RECEIVED (Y/N): GIVEN NAME: TAKESHI N PRIORITY DATE: 11 / 98 PRIORITY CLAIMED (Y/N): 30 / NO BASIC FEE (Y/N): US DESIGNATED ONLY (Y/N): N ATTORNEY DOCKET NUMBER: 450101 02196 COUNTRY: CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 *TELE*PHONE 0000000000 FAX

NAME: WILLIAM S FROMMER

STREET: 745 FIFTH AVENUE

CITY: NEW YORK

STATE/COUNTRY: NY ZIP: 10151

EMAIL:

APPLICATION TITLES:

INFORMATION PRIVIDING APPARATUS AND INFORMATION PROVIDING METHOD

TAB TO LAST POSITION, PUSH SEND